

Mail Drop 521M Motor Carrier and Tax Services Motor Vehicle Division PO Box 2100

**FUEL EXPORTER REFUND REQUEST** 

• Include copies of bills of lading, purchase invoices and sales invoices.

• Refunds must be requested within 3 months of export (or 3 years if you are a licensed supplier, vendor, restricted distributor or IFTA carrier).

• One request per person each 6 month period, if allowable claim is less than \$10.

Account Nam	ie			Account Number			Ref	Refund Period Beginning Date Refund Period Ending Date						
Mailing Addre	ess					City			Sta	ate Z	ip	Pi (	hone Numbe	er er
Gasoline Export Date	Bill Of Lading Number	Gallons	Tax Rate	Amo	unt		Out-of-State Purchaser Name			State Exported To		Suppli To Whom Tax		ier : Was Paid
			x \$.18											
			x \$.18											
			x \$.18											
Gasoline Ref		x \$.18												
<b>Diesel</b> Export Date	Bill Of Lading Number	Gallons	Tax Rate	Amo	unt		Out-of-State chaser Name			Sta Export		Tc	Suppl Whom Tax	
			x \$.26											
			x \$.26											
			x \$.26											
Diesel Refund Amount			x \$.26											
<b>Aviation</b> Export Date	Bill Of Lading Number	Gallons	Tax Rate	Amo	unt		Out-of-State Purchaser Name			State Exported To		Supplier To Whom Tax W		
			x \$.05											
			x \$.05											
Aviation Refund Amount x \$.05					I certify that I paid the Arizona tax for this fuel and have exported the fuel from Arizona to the state shown, and that I will maintain supporting documents for a minimum of 3 years.									
Total Refund Due (Gas + Diesel + Aviation)					Authorized signer must be the taxpayer or officer representing the taxpayer (others require that a <b>power of attorney</b> be attached or on file with MVD).									
Preparer Name Title								Preparer Signature				Date		
Authorized Signature				1	Title				Date		Claim Nu	ımber (MVD		